

**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	10/813,871-Conf. #5569
Filing Date	March 31, 2004
First Named Inventor	Adam J. FERRARI
Title	INTEGRATED APPLICATION FOR MANIPULATING CONTENT IN A HIERARCHICAL DATA-DRIVEN SEARCH AND NAVIGATION SYSTEM
Art Unit	2163
Examiner Name	H. T. Vy
Attorney Docket No.	109878.141-US1

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

OR

Practitioner(s) named below:

Name	Registration Number	Name	Registration Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number:

OR

The address associated with Customer Number:

OR

Firm or  
Individual Name

Address

City

State

Zip

Country

Telephone

Email

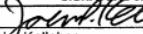
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

SIGNATURE of Applicant or Assignee of Record

Signature 	Date <input type="text" value="9/17/07"/>
Name <input type="text" value="John Kelleher"/>	Telephone <input type="text" value="617-674-6033"/>

Title and Company

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

\*Total of  forms are submitted.